



Infant Development and Babywearing  
*A Medical Perspective*

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# Infant Development and Babywearing

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### **“Is this position good for my baby’s physical development?”**

New parents often worry whether their baby is developing properly. It is well known that wearing baby in a front carrier helps improve the baby’s emotional development by strengthening the infant-parent bond, but as a parent you may also want to know more about how a baby carrier affects your infant’s growing hips and spine.

With the amount of information more readily available through a variety of on- and off-line sources, it can sometimes be difficult to sort out what is medically fact-based versus solely someone’s opinion.

In an effort to address parents’ questions regarding their infant’s development and babywearing with the best science available, we asked prominent pediatrician and mother, Dr. Amanda Weiss-Kelly, to answer some frequently asked questions relative to infant development and babywearing.

Dr. Kelly is a board certified pediatrician and a pediatric musculoskeletal health and wellness expert on staff at University Hospitals Rainbow Babies & Children’s Hospital, recognized as one of America’s Best Children’s Hospitals by U.S. News & World Report. She is a graduate of Johns Hopkins University and The George Washington School of Medicine and is currently an assistant professor at Case Western Reserve University, Cleveland, Ohio.





## How does hip development relate to baby carriers?

Hip development occurs very early in intrauterine development, with the hip joint already formed by the 7th week of gestation. One condition pediatricians often worry about with infants is Developmental Dysplasia of the Hip (DDH). DDH is the medical term used to describe a problem with formation of the hip joint in which the hip socket has not developed properly, causing the hip to dislocate. The exact cause of DDH is not easy to pin down as there are thought to be many factors that can contribute to developing this condition.

As a parent, there is no need to be concerned that wearing your baby in a front infant carrier will be harmful to their development as there is no evidence or reported cases that indicate front infant carriers can cause hip dysplasia.



## How does spine development relate to baby carriers?

The spine grows differently than any other bone in the body and changes in vertebrae can occur up until about 18 years of age. To ensure proper spine development, one of the most important things a parent can do is to give your child an opportunity to move their limbs. Infants should experience different positions throughout the day (ex.: tummy time, held by a parent, sleeping in a bed, carried in a front carrier, etc.) and not be held in one position all day. There is also no evidence that infant carriers cause a child's spine to develop improperly.

## Should a baby face in or out while in a baby carrier?

Whether or not a child should face in or out while in a baby carrier depends on their age and developmental stage. Babies should face in as infants as this position stabilizes their head and neck and protects their airway. When an infant is facing the wearer's chest, the parent can feel their breath, know where the infant's head is positioned and change the infant's head position easily to ensure the baby's airway is open.

When baby's back and spine muscles are sufficiently developed and they can hold their head up (around four months of age), they should face out. Most babies around this age are fascinated by their environment and thrilled to observe their surroundings while being carried close, with their back nestled comfortably against the wearer's chest.

“ At four months of age, infants are described as ‘hatching’ socially, becoming more interested in a wider world...in the mother's arms, the infant may literally turn around, preferring to face outward.”

Kliegman: Nelson Textbook of Pediatrics, 18th ed



## How can I avoid back pain when using a baby carrier?

When babywearing, you should choose a baby carrier that distributes baby's weight evenly and follow the manufacturer's wearing instructions. By making sure that the carrier straps are adjusted correctly, fit snugly on your body and ensuring that baby is held close to your body, it will be better for your back. You should also respect the recommended weight limits of your baby carrier and take breaks from wearing the carrier – giving both you and baby a break.

Your back pain may not actually be caused by your baby carrier. 90% of Americans complain of some type of back pain whether they are babywearing or not. By building core muscle strength and overall fitness, improving flexibility and not slouching, you can reduce your chances for general back pain.



## What should I look for in a baby carrier?

A baby carrier should:

- Allow for eye-to-eye contact with infants
  - Comforts parent and baby and encourages bonding
- Position baby with their hips abducted (legs spread)
- Allow baby to face out and see world once older
- Be secure
  - Reliable closures to ensure baby's safety
  - Infant's head and neck are supported and upright to reduce risk of airway obstruction
- Be easy to put on and take off alone
  - Easy to place child in and take child out
- Be comfortable for parent and baby
  - Easily adjustable for parents
  - Distributes baby's weight evenly
  - Adjustable to accommodate baby's growth

For over 35 years, BabyBjörn has developed its baby carriers in close cooperation with medical experts to give parents like you peace of mind knowing you are choosing the best for your baby.

To view a video presentation by Dr. Kelly and to learn more about BabyBjörn's collaboration with the medical community, please visit [www.babybjorn.com](http://www.babybjorn.com).



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